

## PLACE OF BIRTH

## ARIZONA STATE BOARD OF HEALTH

1. County of Gila

District of \_\_\_\_\_

Town of Globe

or

City of \_\_\_\_\_

## BUREAU OF VITAL STATISTICS

## ORIGINAL CERTIFICATE OF BIRTH

State Index No. 219County Registrar No. 2Local Registrar No. 2No. Gila County Hosp. Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Mary Agnes Pritchard (If child is not yet named, make supplemental report, as directed.)3. Sex of Child Fr To be answered ONLY in event of plural births. 4. Twin, triplet or other. 5. Legitimate? yes 7. Date of birth Jan 25 - 25  
Month Day Year5. No., in order of birth 58. FATHER  
Full name Carl R Pritchard9. Residence (Usual place of abode) Globe

If non-resident, give place and state.

10. Color or race W 11. Age at last birthday 29 (Years)12. Birthplace (city or place) (State or country) Germ13. Occupation  
Nature of industry Assayer14. MOTHER  
Full maiden name Bessie Hagg15. Residence (Usual place of abode) Globe  
If non-resident, give place and state.16. Color or race W 17. Age at last birthday 31 (Years)18. Birthplace (city or place) (State or country) W. Va.19. Occupation  
Nature of industry Housewife20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 4 (b) Born alive but now dead 6 (c) Stillborn 6 21. Were precautions taken against ophthalmia neonatorum? yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was Born alive at 2 P m. on the date above stated  
(Born alive or stillborn.)\* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.  
Signature P. D. Kennedy (Physician or midwife)  
Address Globe Ariz

Given name added from a supplemental report. Month, day, year

Filed Jan 28, 1925 G. E. Wyllie Local Registrar.Filed Jan 28, 1925 G. E. Wyllie County Registrar.

Registrar

474-125-287

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.